

Application or Docket Number

10/517023

CLAIMS AS FILED - PART I								SMALL	ENTITY		OTHE	R THAN
_	·	•	(Colui	(Column 1)		(Column 2)				OF		- ENTITY
	TOTAL CLAIMS							RATE	FEE		RATE	FEE
F	FOR		NUMBER FILED		NUMBER EXTRA		1	BASIC FE			BASIC FE	
	TOTAL CHARGEABLE CLAIMS			/ / minus 20=		•		XS 9=		OR	X\$18=	
II—	IDEPENDENT		a minus 3 =		*			X43=		OR	You	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=				
* If the difference in column 1 is less than zero, enter "0"						column 2		TOTAL	200	OR	-290= TOTAL	
	CLAIMS AS AMENDED - PART II								375			
		(Column 1)		(Colum	nn 2)	(Column 3)		SMALL	ENTITY	OR		THAN ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAI FEE
	Total	•	Minus	**		=		XS 9=		OR	X\$18=	
AME	Independent	ENTATION OF M	Minus	THE DEALE	C1 4114	=		X43=		OR	X86=	
_	FIRST PRES	ENTATION OF M	OLTIPLE DE	PENDENT	CLAIM		Ī	+145=		OR	+290=	
	·									۱ ۱	TOTAL	
	(Column 1) (Column 2) (Column 3)										ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
AME	Independent	-	Minus	***		=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF ML	ILTIPLE DE	PENDENT C	CLAIM		\vdash	+145=		1	+290=	
						•	L	TOTAL	· · · · ·	OR	TOTAL	
		(Column 1)		(Cal.,	. 0\.	· · · · · · · · · · · · · · · · · · ·	AE	DIT. FEE	<u> </u>	OR A	DDIT. FEEL	·
ပ		CLAIMS		(Column	ST I	(Column 3).	_	· ·	ADD!			4551
AMENDMENT		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
AM I	Independent		Minus	***	ľ	= '		X43=			X86=	
	PIRST PRESE	NTATION OF MU	LTIPLE DEF	PENDENT C	LAIM		. -			OR	-	
• If	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	·
11	* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DIT. FEE	
. т	he Highest Numb	per Previously Paid	For (Total or	Independent)	is the h	s, enter 3. ighest number f	ound	in the appr	opriate box		_	
MAC	PTO-875 (Rev 10:	22.		· · · · · · · · · · · · · · · · · · ·							THENT OF C	